PATENT APPLICATION SERIAL NO. 10/591075

U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

09/06/2006 NKAYPAGH 00000083 10591075

01 FC:1631 300.00 DP 02-FC:1632 500-00 DP 03 FC:1633 200.00 DP

> Repln. Ref: 04/20/2007 JANDERSO 0007054900 DAH:231925 Name/Number:16591075 FC: 9204 \$100.00 CR

> 04/20/2007 JANDERSO 00000001 10591075 01 FC:1642 400.00 OF

iz F.C: 1632 .

-560. 00 -ni

PTO-1556 (5/87)

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number 10/591075

Effective December 6, 2004									10/3/10/3			
		CLAIMS	AS FILED -		(Column 2)			SMALL ENTITY		OR	OTHER SMALL	
U.S	. NATIONAL	STAGE FEES						RATE	FEE	7	RATE	FEE
BAS	IC FEE		SMALL ENT. = \$ 150		LAR	LARGE ENT. = \$ 300		ASIC FEE		OR	BASIC FEE	300
EXA	MINATION FE	E	Satisfies PCT Article 33(1)- (4) = \$50/\$100			All other situations = \$ 100 / \$ 200		CAM. FEE		1	EXAM. FEE	200
SEA	RCH FEE		U.S. is ISA = \$50 / \$ 100 ALL other countries = ** \$ 200 / \$ 400			ALL other situations = \$ 250 / \$ 500		EARCH FEE			SEARCH FEE	4w
FEE	FOR EXTRA S	SPEC. PGS.	minus 100 =		•	/ 50 =		X \$ 125 =		1	X \$ 250 =	
тот	AL CHARGEAI	BLE CLAIMS	7 mir	nus 20 =	* -			X \$ 25 =		OR	X \$ 50 =	
IND	EPENDENT CL	AIMS	(minus 3 = *			_	;	X \$ 100 ≐		OR	X \$ 200 =	
		DENT CLAIM PR			_			+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2						lumn 2		TOTAL		OR	TOTAL	900
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALLE	ENTITY	OR	OTHER SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	HIGH NUM PREVI PAID		BER DUSLY	ER PRESENT JSLY EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* .	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	>	(\$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\$ 180 =		OR	+ \$ 360 =	
							TO	TAL ADDIT.		OR	TOTAL ADDIT. FFF	
		(Column 1)		(Colum	าก 2)	(Column 3)						
X		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	>	(\$25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	X	\$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+	\$ 180 =		OR	+ \$ 360 =	
							то	TAL ADDIT. FFF	,	OR	TOTAL ADDIT. FFF	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. ORM PTO-875 (Rev. 02/2005)												